Why Report to the Central Cancer Registry?

• More cancers are being diagnosed and treated in physician offices!

In the early years of the Central Cancer Registry, most of the cancer diagnosis and care was done by the large hospitals and cancer centers across the state. Both diagnosis and treatment patterns have changed over the last several years, with <u>a substantial</u> <u>number of cases being diagnosed and/or treated in physician offices!</u>

• Undercounting cancer results in fewer dollars spent on screening and treatment services for North Carolinians!

Undercounting of cancer affects incidence rates by underestimating the relative burden of these cancers. Funding decisions for research and cancer control planning are made based on incidence rates, which could result in *lost funding for programs in North Carolina.*

• It's the law!

State law <u>requires</u> that all facilities that diagnose or treat cancer are required to report to the Central Cancer Registry (CCR) within 6 months of diagnosis. This includes <u>physicians</u>, hospitals, pathology laboratories, and freestanding treatment centers.

Report any case that meets any of the following criteria:

- All patients with *malignant cancers, as well as non-malignant brain/central nervous system tumors* that are not diagnosed or treated in a hospital.
- All patients with *recurrence*, if not diagnosed or treated in a hospital.
- Information is sometimes requested by the CCR based on death certificates. If you get such a request but did not treat the patient, please provide the name of the referring physician, if available.

To initiate reporting and to learn more about reporting requirements, please contact either:

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100 copies of this public document were printed at a cost of \$2.90 or .029 per copy. 11/06

